



# Work Order Bid (ID)

## WORK ORDER INFORMATION

**Work Order Name:** 13013SH3114/1

**Work Order Type:** Weatherization

**Audit Name:** 13013SH3114

## CLIENT INFORMATION

**Client ID:** 13013SH3114

## AGENCY INFORMATION

**Agency:** Shelby County Community Services Agency

**Agency Phone:** (901) 222-4280

**Address:** 3772 South Hickory Ridge Mall, Suite 516  
Memphis, TN 38115

**Fax:** (901) 222-4313

**Email Address:**

**Agency Contact:** GAILLARD, GREG

**Work Phone:**

**Cell Phone:**

**Email Address:**

**Company Name & License Number:** \_\_\_\_\_

**Contractor's Signature:** \_\_\_\_\_

## COMMENT

## Measures

### Measure 1 Infiltration Redctn

### Components

Inspected

**Comment** WEATHER STRIP DOOR FRT, SIDE, FURNACE,CLOSET  
DOOR SWEEP FRT, SIDE,FURNACE CLOSET  
REPLACE BROKEN PANE WD #9-30X12  
ASPP KITCHEN, BATH,WASHING MACHINE  
REPLACE ATTIC ACCESS COMPLETE

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#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Miscellaneous Su	Infiltration Reduction	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Infiltration Reduction	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

#### Other Detail

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Measure Sub Total:

Sub Total:

Field Notes:

### Measure 2 Replace A/C

### Components AC1

Inspected

**Comment** REPLACE CENTRAL AIR SYSTEM COMPLETE  
3 TONS

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#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Cooling Equipmen	Central A/C -	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Central A/C -	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

#### Other Detail

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Measure Sub Total:

Sub Total:

Field Notes:

**Measure 3 Storm Windows****Components** WD3**Inspected****Comment**☐

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Windows	Storm Window	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Storm Window	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Other Detail**

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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Measure Sub Total:****Sub Total:****Field Notes:****Measure 4 Replace Htg. System****Components** HS1**Inspected****Comment** REPLACE HEATING SYSTEM COMPLETE  
80,000 BTU☐

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Heating Equipmen	REPLACE HTG. SYSTEMS	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	REPLACE HTG. SYSTEMS	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Other Detail**

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**Measure Sub Total:****Sub Total:****Field Notes:**

**Measure 5 CO MONITOR NEEDED****Components****Inspected****Comment** QTY 2☐

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety	CO MONITOR NEEDED	Each	2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	CO MONITOR NEEDED	Each	2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Other Detail**

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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Measure Sub Total:****Sub Total:****Field Notes:****Measure 6 FIX NONOPERATIONAL KITCHEN EXHAUST FAN****Components****Inspected****Comment** INSTALL VENTED VENT A HOOD☐

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety	FIX NONOPERATIONAL KITCHEN EXHAUST FAN	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	FIX NONOPERATIONAL KITCHEN EXHAUST FAN	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Other Detail**

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**Measure Sub Total:****Sub Total:****Field Notes:**

**Measure 7 PRACTICE LEAD SAFE WEATHERIZATION (WALLS)**

**Components**

**Inspected**

**Comment**

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#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety	PRACTICE LEAD SAFE WEATHERIZATION (WALLS	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	PRACTICE LEAD SAFE WEATHERIZATION (WALLS	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Other Detail**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Measure Sub Total:**

**Sub Total:**

**Field Notes:**

**Measure 8 PressureRelief Piping Needed**

**Components**

**Inspected**

**Comment**

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#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety	Pressure relief piping	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Pressure relief piping	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Other Detail**

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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Measure Sub Total:**

**Sub Total:**

**Field Notes:**

**Work Order Grand Total:**

**Grand Total:**